Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective November 10, 1998

091383115

| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |  |          |                                 |               |      |  |                  |          | SMALL ENTITY TYPE |                        |      | OTHER THAN OR SMALL ENTITY |                        |
|---|--|----------|---------------------------------|---------------|------|--|------------------|----------|-------------------|------------------------|------|----------------------------|------------------------|
| FOR   |  |          | NUMBER FILED                    |               |      | NUMBER EXTRA                               |                  | ] r      | RATE              | FEE                    | 1    | RATE                       | FEE                    |
| BASIC FEE   |  |          |                                 |               | -    |  |                  |          |                   | 380.00                 | OR   |                            | 760.00                 |
| TOTAL CLAIMS  |  |          | 5                               | minus         | 20=  | *  |                  |          | X\$ 9=            |                        | OR   | X\$18=                     |                        |
| INDEPENDENT CLAIMS  |  |          | 3                               | minus         | 3 =  | *  |                  |          | X39=              |                        | OR   | X78=                       |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  |          |                                 |               |      |  |                  | ] [      | +130=             |                        | OR   | +260=                      |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2                          |  |          |                                 |               |      |  |                  | -        | TOTAL             | ***                    | OR   | TOTAL                      | 26000                  |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)                                      |  |          |                                 |               |      |  |                  |          | SMALL             | ENTITY                 | OR   | OTHER<br>SMALL             |                        |
| AMENDMENT A   | REM.   |          | AIMS<br>AINING<br>TER<br>IDMENT |               | PF   | HIGHEST<br>NUMBER<br>REVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |          | RATE              | ADDI-<br>TIONAL<br>FEE |      | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total  | * //     |                                 | Minus         | **   | 20   | =                |          | X\$ 9=            |                        | OR   | X\$18=                     |                        |
|   | Independent  | •5       |                                 | Minus         | ***  |  | =2               |          | X39=              | ÷                      | OR   | X78=                       | 156.00                 |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM               |          |                                 |               |      |  |                  |          | +130=             | ·                      | OR   | -+260=                     | . ·                    |
|   |  |          |                                 | مدد           |      |  | . *              | <br>. A[ | TOTAL<br>DIT. FEE | .• "                   | OR , | TOTAL<br>ADDIT. FEE        | 156.00                 |
|   | (Column 1) (Column 2) (Column 3)                             |          |                                 |               |      |  |                  |          |                   |                        |      | 7                          | ceox                   |
| AMENDMENT B   |  | REM.     | AIMS<br>AINING<br>TER<br>IDMENT | 4             | PF   | HIGHEST<br>NUMBER<br>REVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |          | RATE              | ADDI-<br>TIONAL<br>FEE |      | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total .  | *        | 3                               | Minus         | **   | 20   | <b>-</b>         |          | X\$ 9=            |                        | OR   | X\$18=                     | 1                      |
|   | Independent  | *        | 5                               | Minus         | ***  |  | = 0              |          | X39=              | ,                      | OR   | X78=                       |                        |
|   | FIRST PRESE  | MIAIIC   | IN OF MI                        | JLIIPLE DEI   | ENL  | JENT CLAIM                                 |                  | ' [      | +130=             |                        | OR   | +260=                      |                        |
|   |  |          |                                 |               |      |  |                  | AE       | TOTAL<br>DIT. FEE |                        | OR   | TOTAL<br>ADDIT. FEE        | -0°                    |
|   |  |          | umn 1)                          |               |      | column 2)                                  | (Column 3)       |          |                   |                        |      |                            |                        |
| AMENDMENT C   |  | REM.     | AIMS<br>AINING<br>TER<br>IDMENT |               | PF   | HIGHEST<br>NUMBER<br>REVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |          | RATE-             | ADDI-<br>TIONAL<br>FEE |      | RATE                       | ADDI-<br>TIONAL<br>FEE |
|   | Total  |          |                                 | Minus **      |      |  | P                |          | X\$ 9=            |                        | OR   | X\$18=                     |                        |
|   | Independent  |          |                                 | Minus ***     |      |  | =                |          | X39=              |                        | OR   | X78=                       |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM               |          |                                 |               |      |  |                  |          | +130=             |                        |      | +260=                      |                        |
| If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  TOTAL  TOTAL |  |          |                                 |               |      |  |                  |          |                   |                        | OR   | TOTAL                      |                        |
| ***   | If the "Highest Nu<br>If the "Highest Nu<br>The "Highest Nun | mber Pro | eviously P                      | aid For IN TH | S SP | ACE is less tha                            | n 3, enter "3."  | ~~       | DIT. FEE          | ropriate box           |      | ADDIT. FEE                 | · ·                    |